

Figure - 1

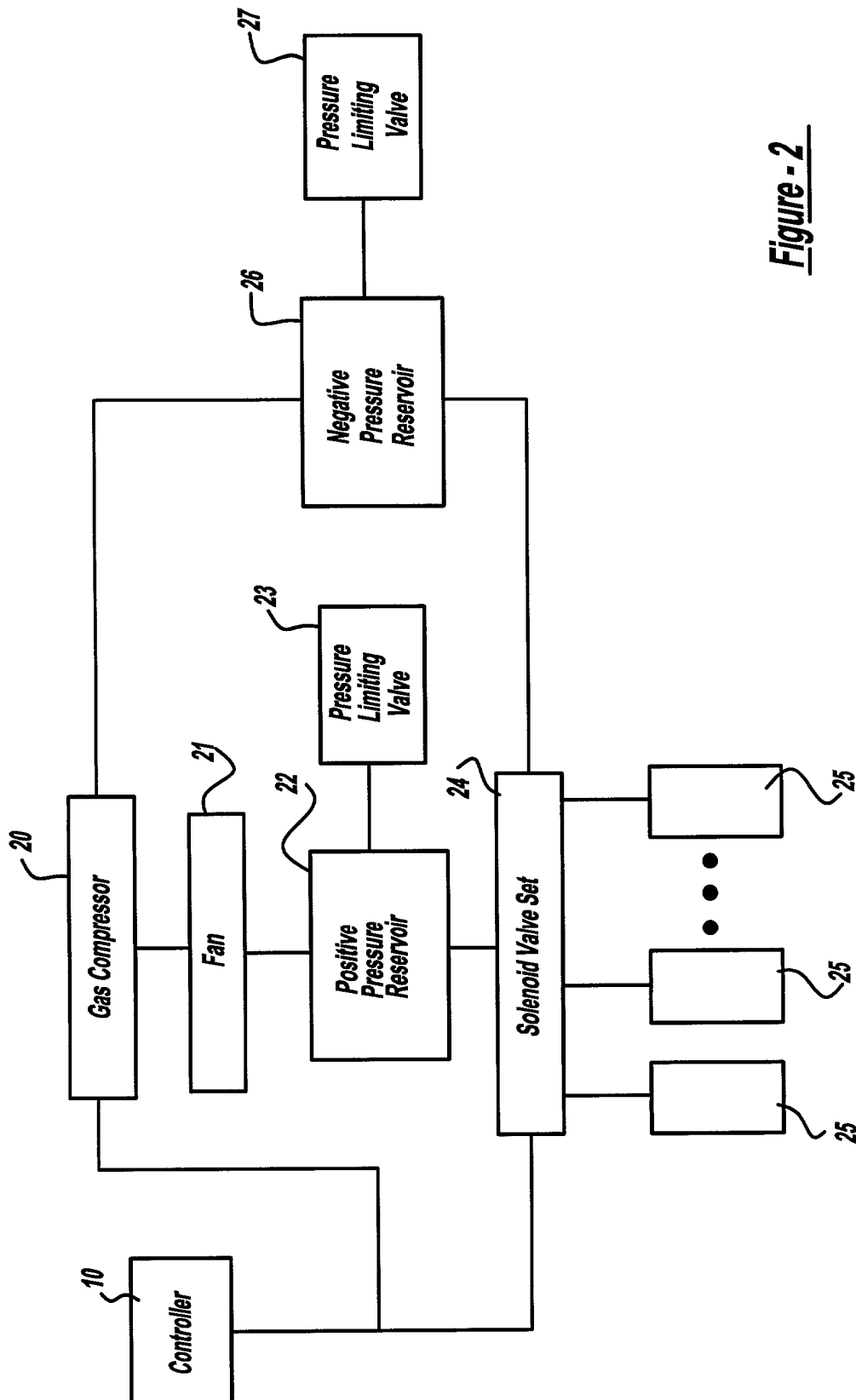
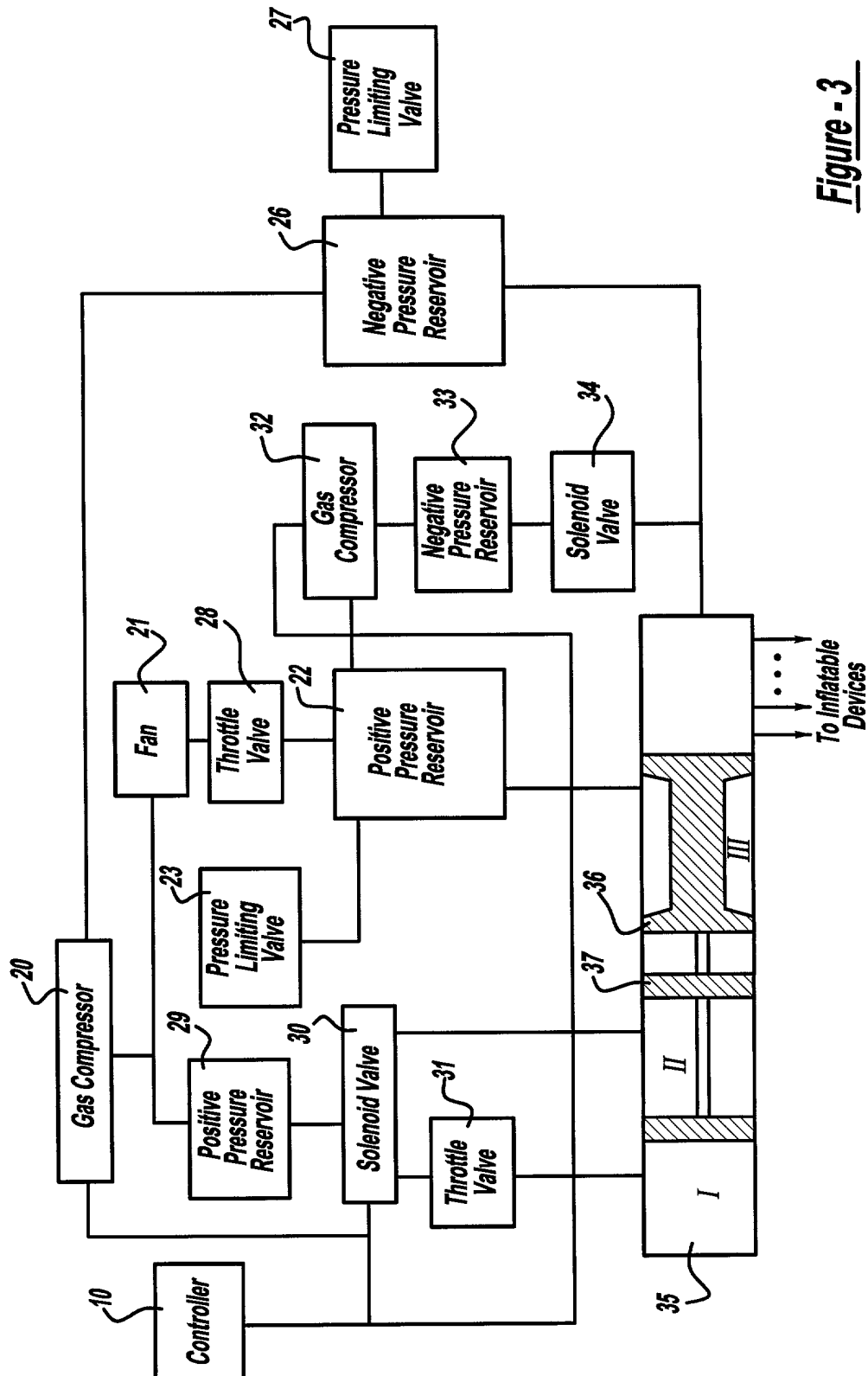


Figure - 2

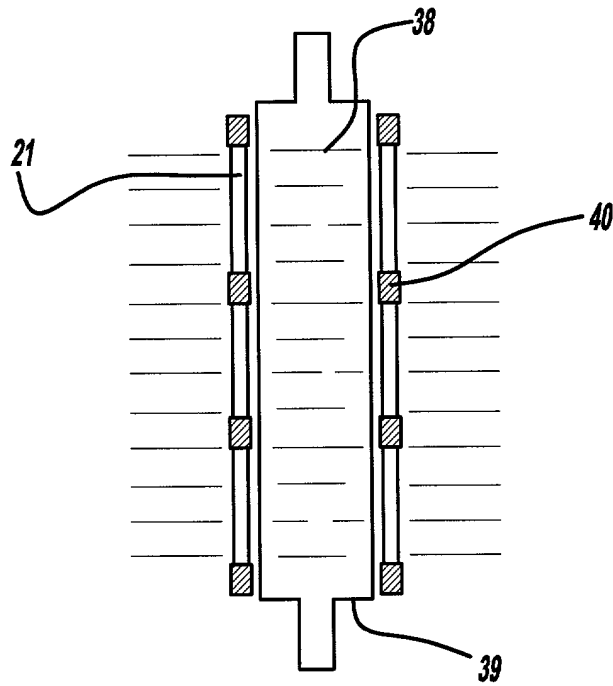


Title: HIGH EFFICIENCY EXTERNAL COUNTERPULSATION  
APPARATUS AND METHOD FOR CONTROLLING SAME

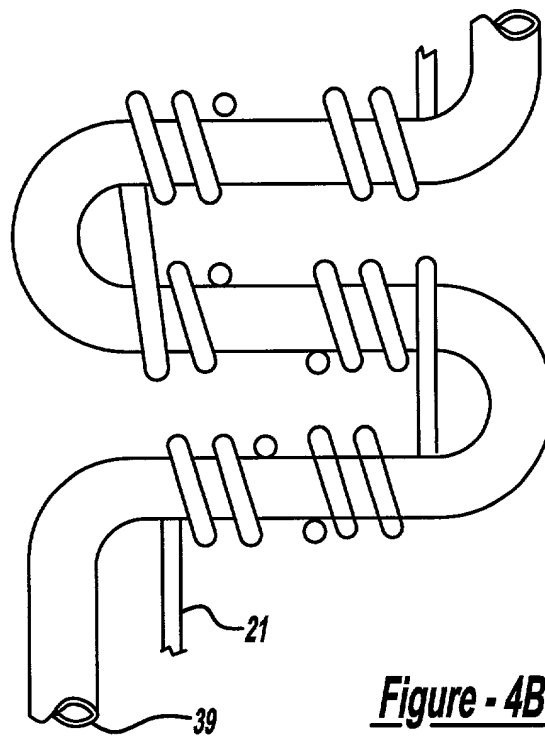
Inventor: JOHN C. K. HUI

Atty. Ref. No.: 4857-000001/CPF

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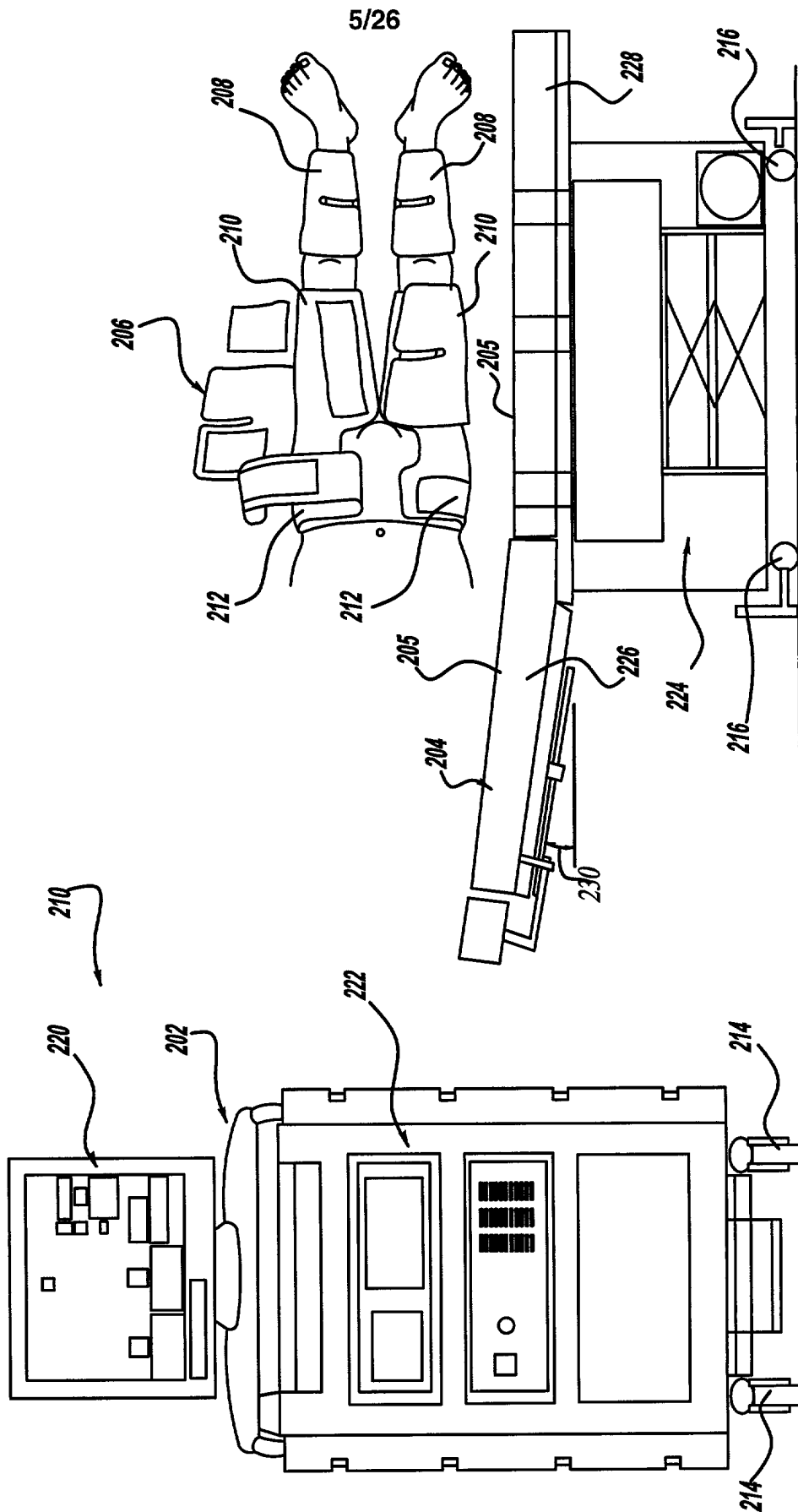
**Figure - 4A**



**Figure - 4B**

Title: HIGH EFFICIENCY EXTERNAL COUNTERPULSATION  
APPARATUS AND METHOD FOR CONTROLLING SAME

Inventor: JOHN C. K. HUI  
Atty. Ref. No.: 4857-000001/CPF



**Figure - 5**

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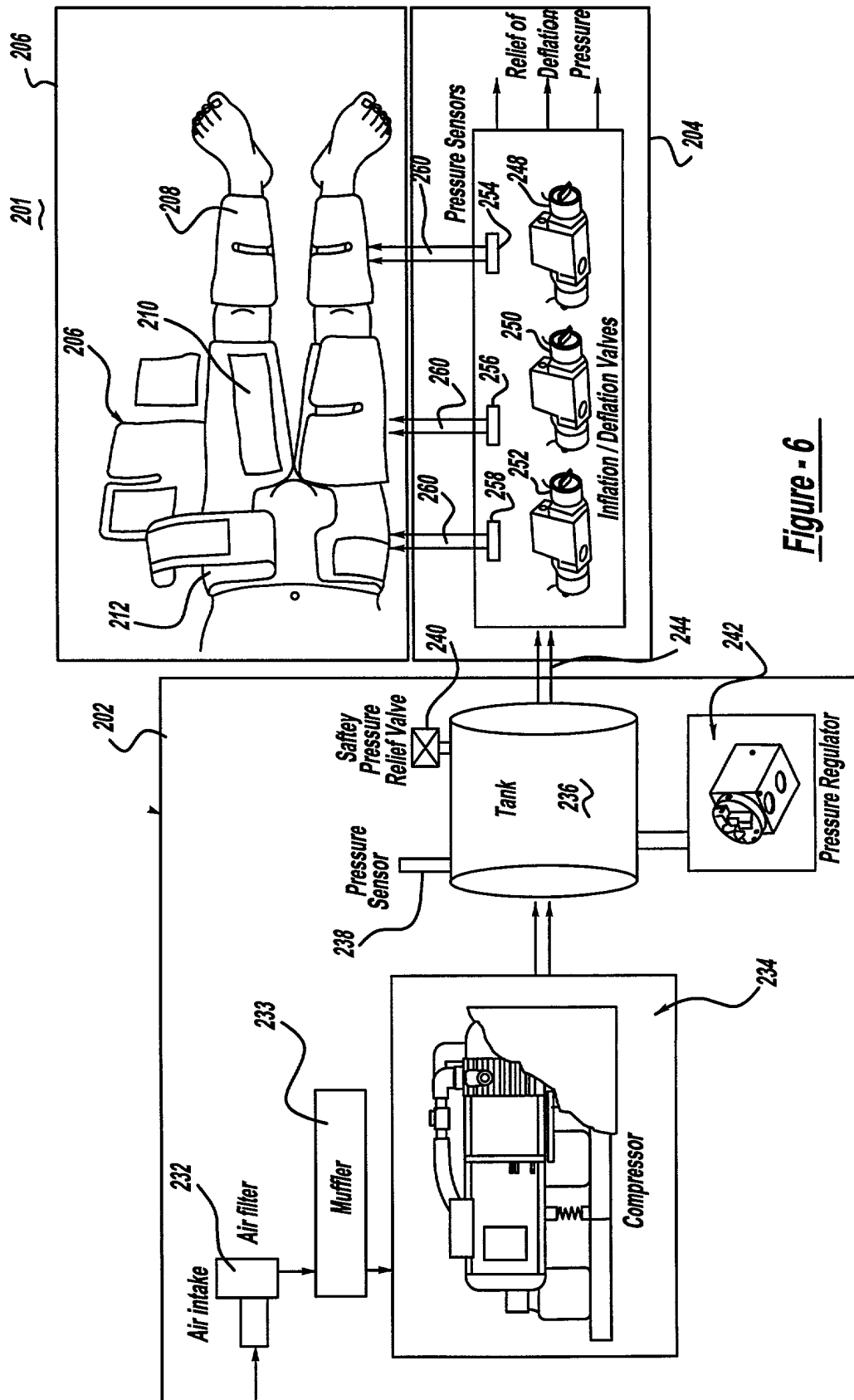


Figure - 6

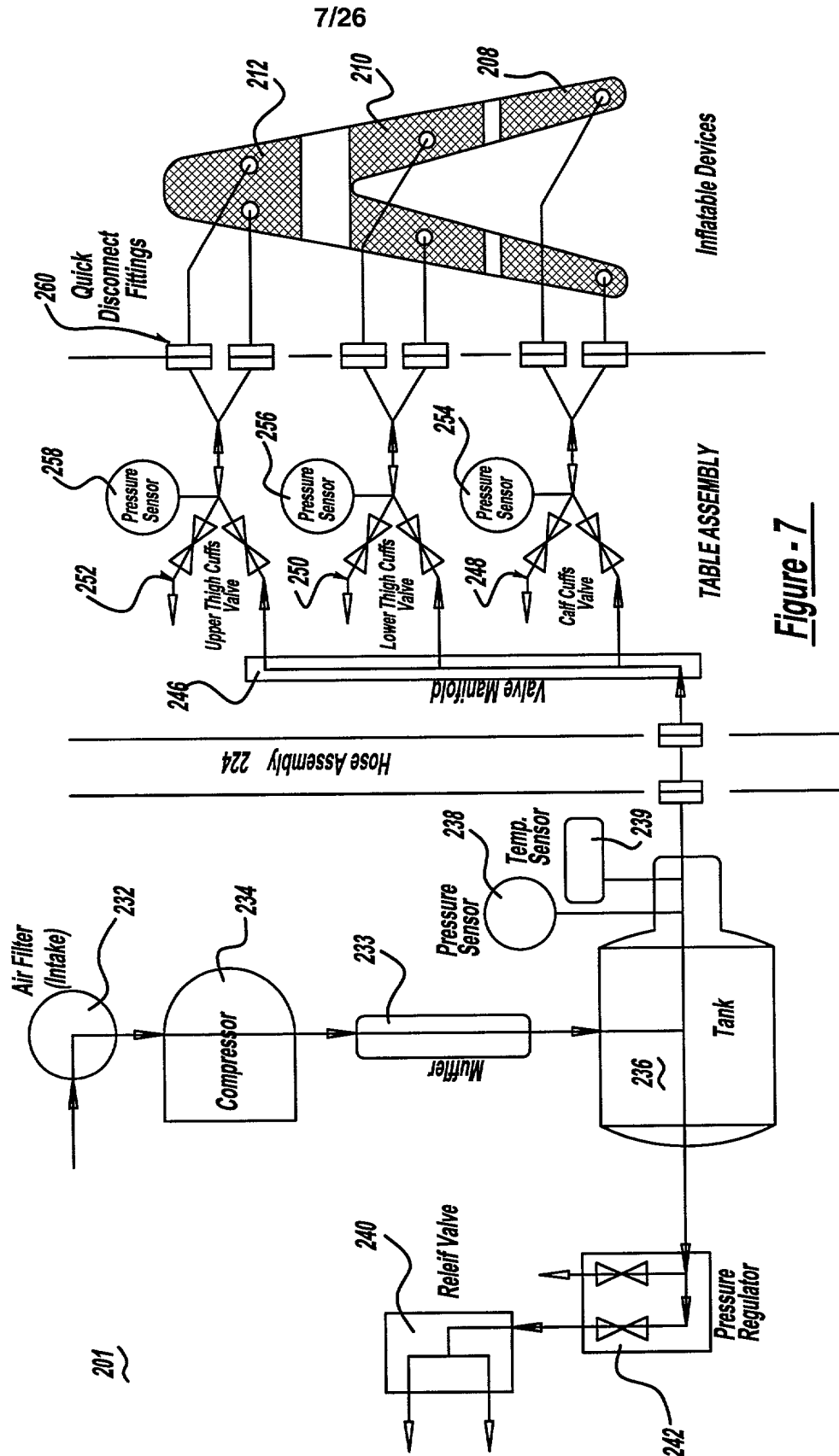
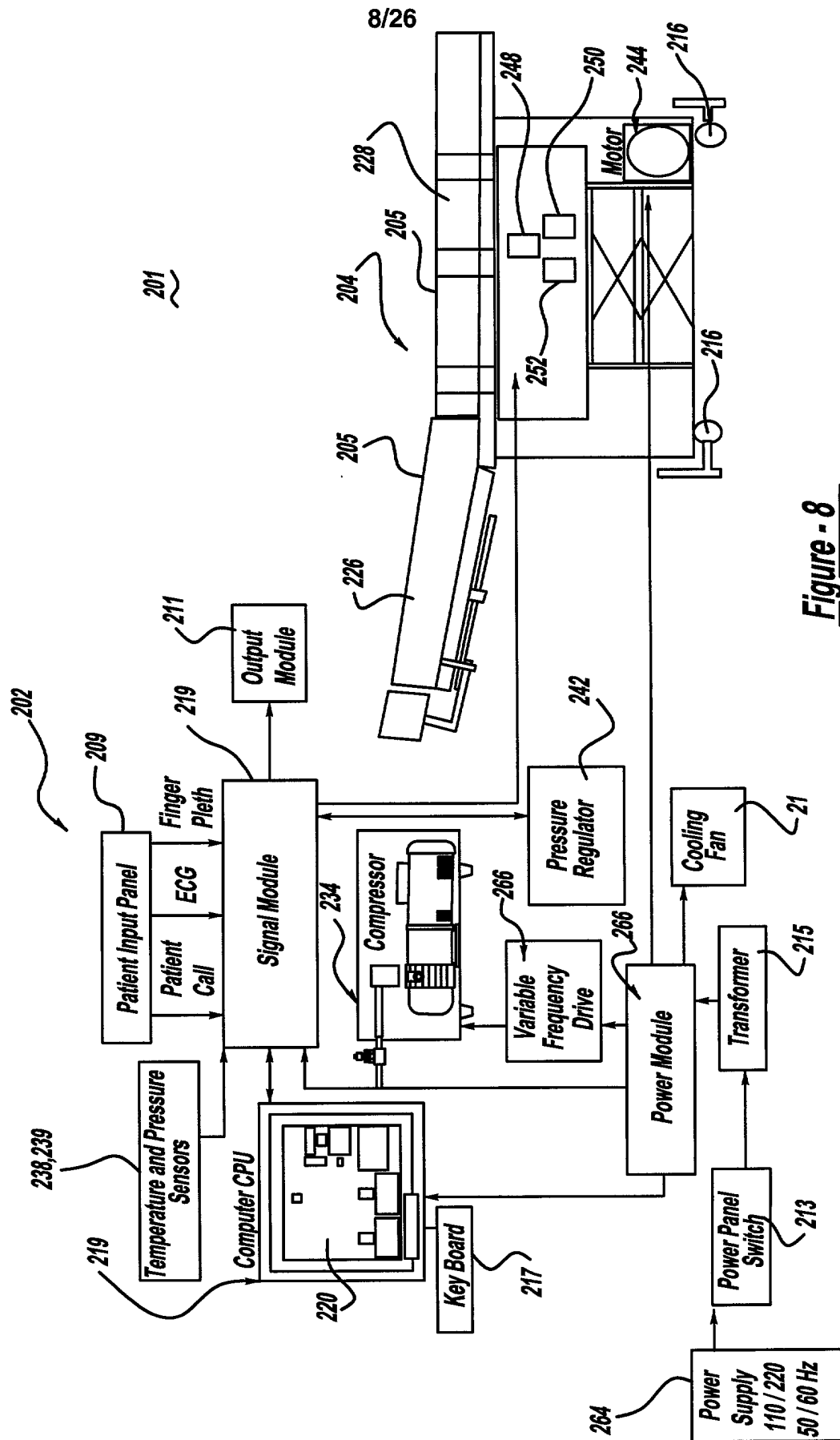


Figure - 7





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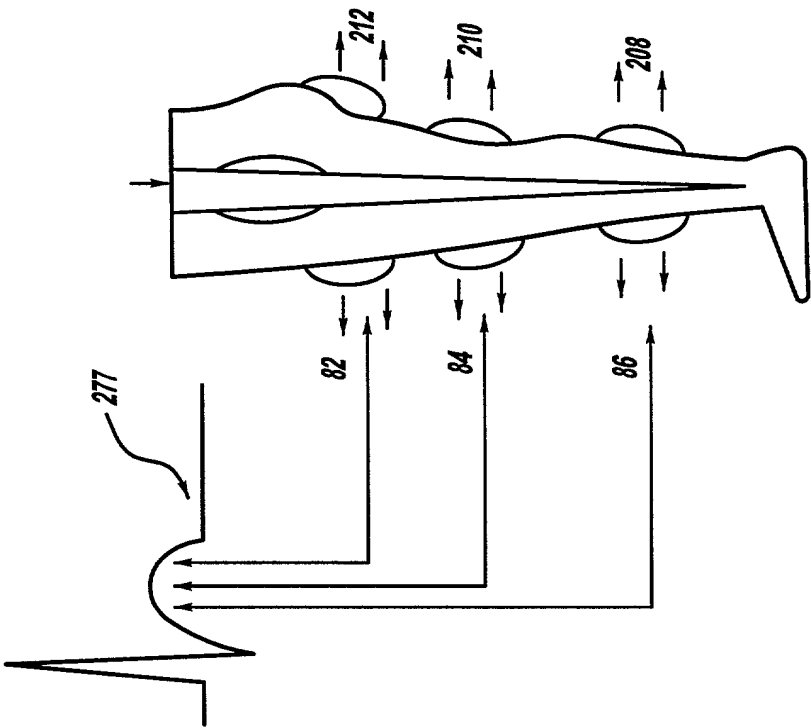


Figure - 9A

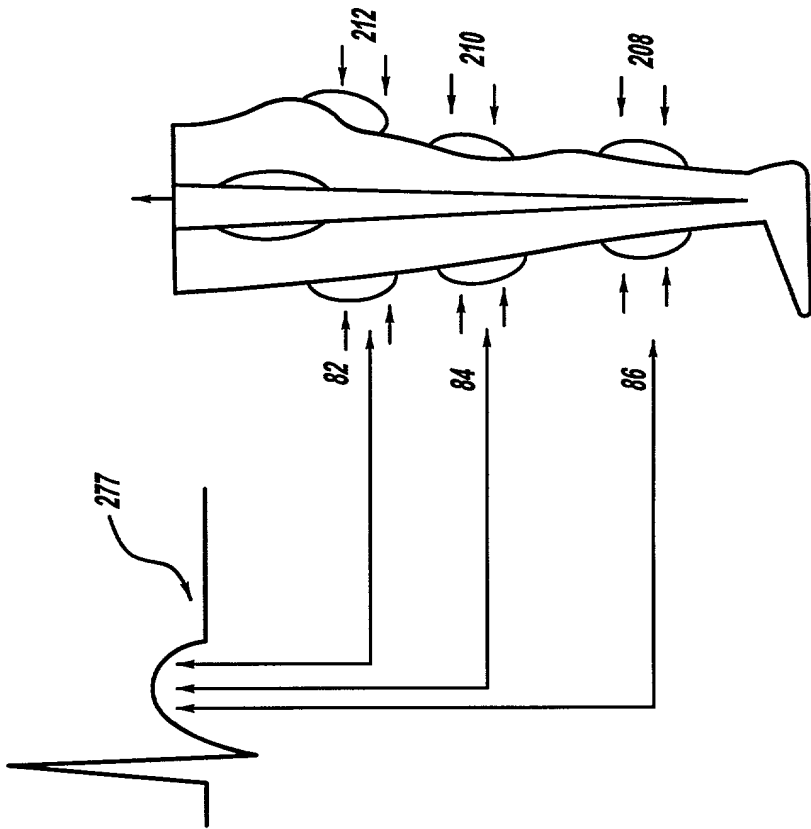
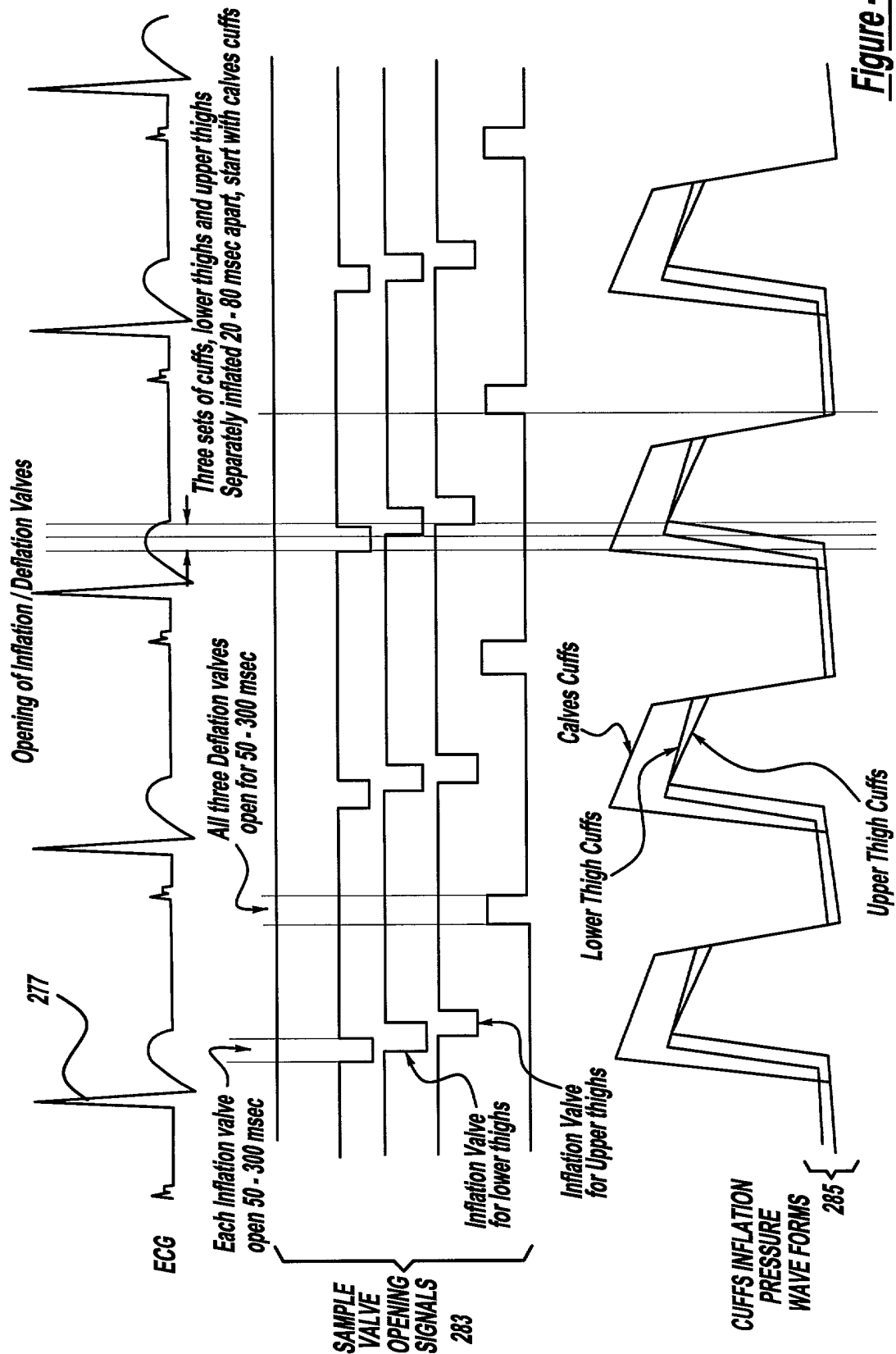
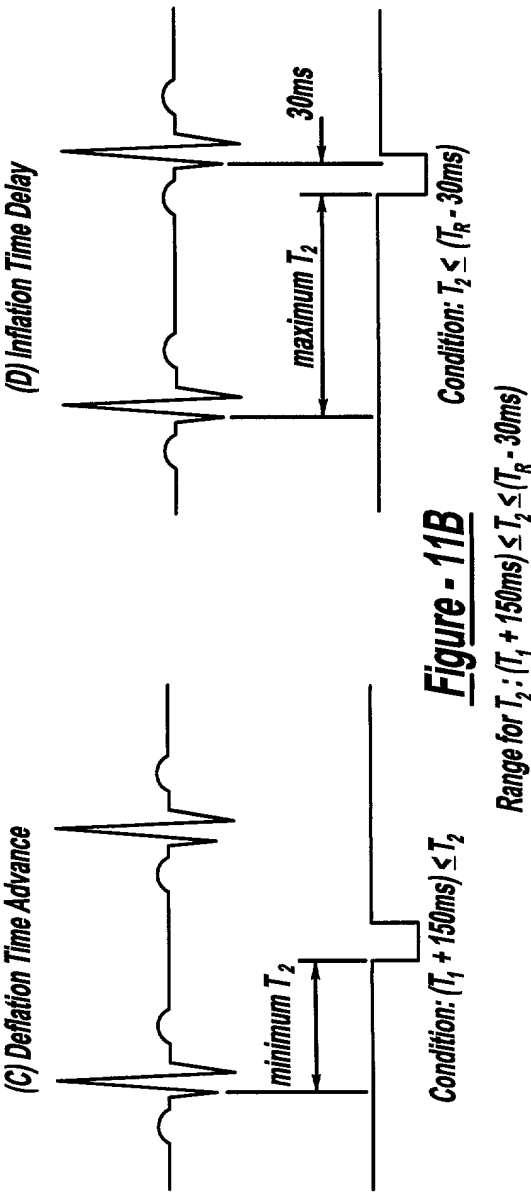
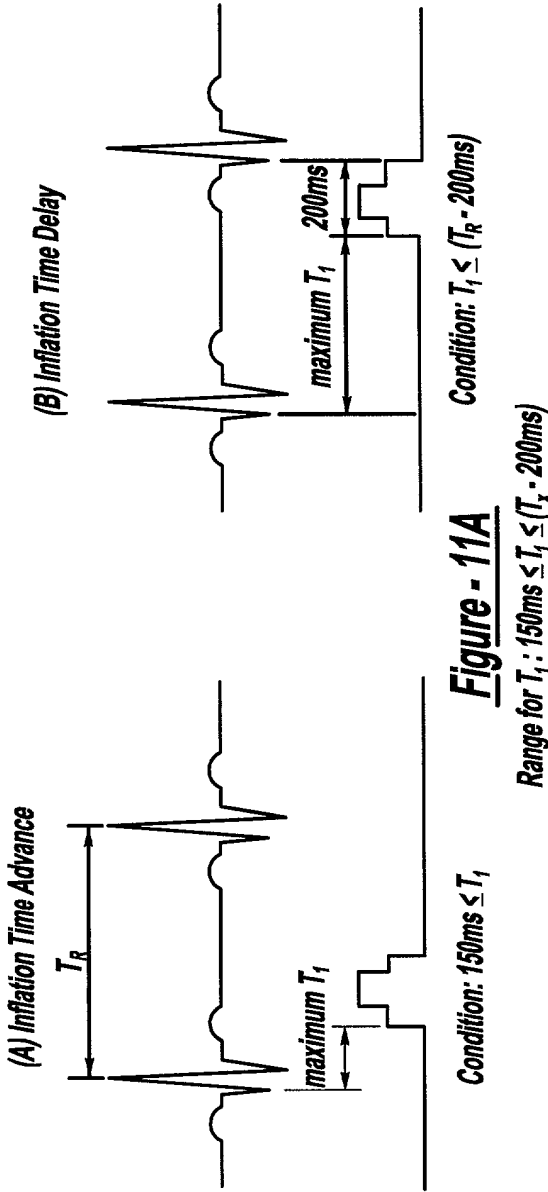


Figure - 9B

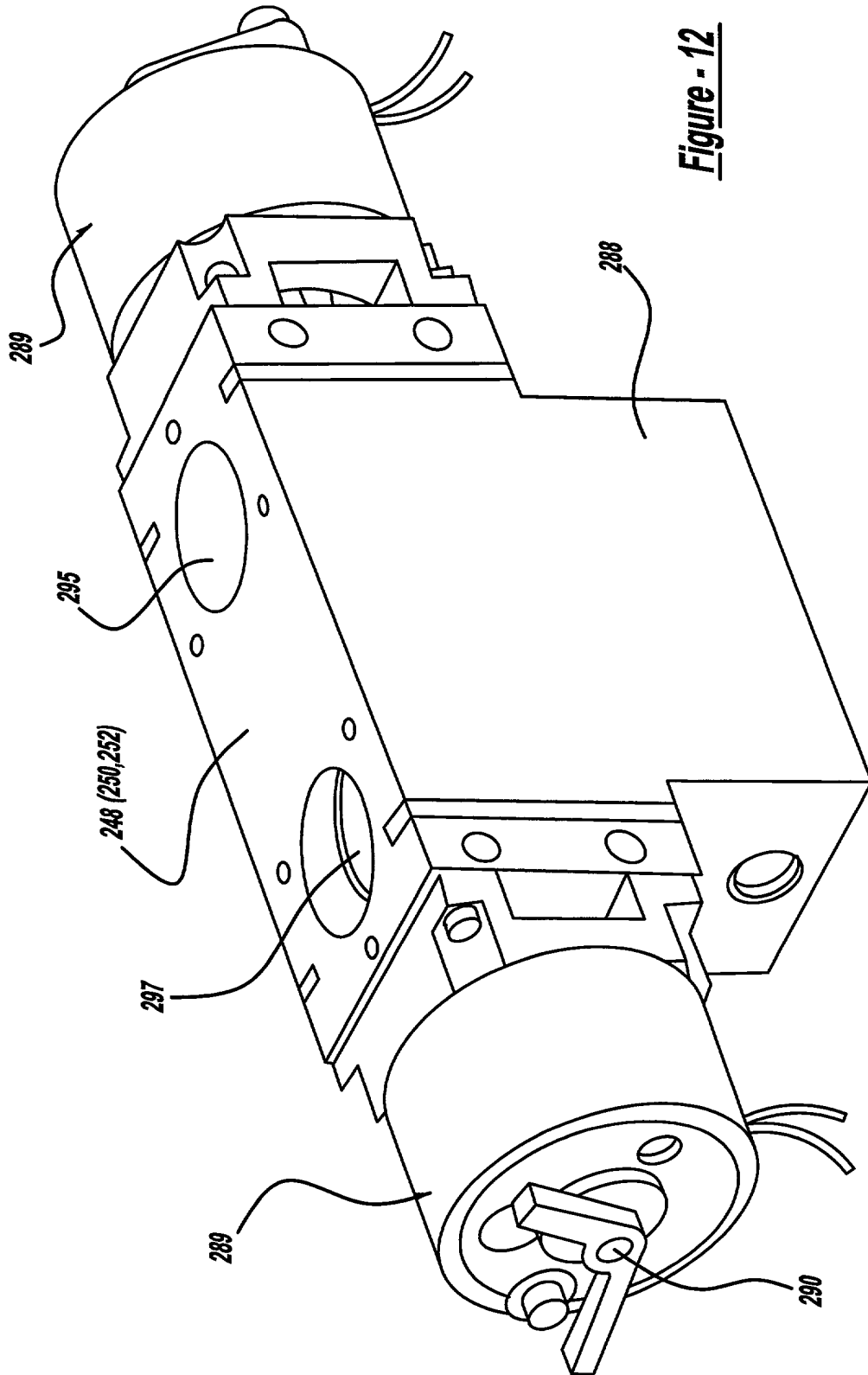
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**Figure - 10**



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**Figure - 12**

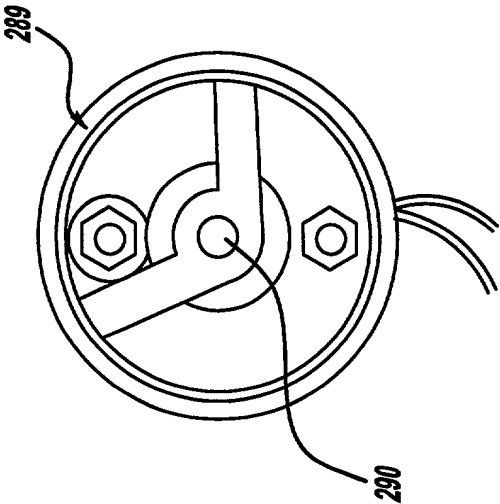


Figure - 15

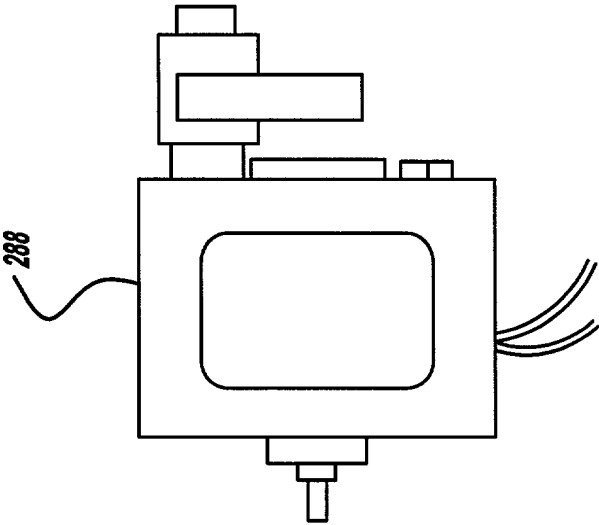


Figure - 13

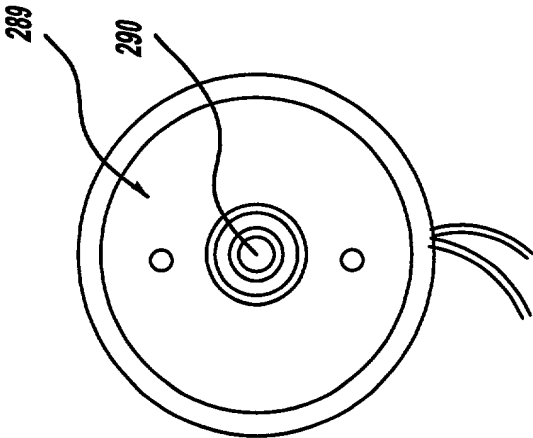


Figure - 14

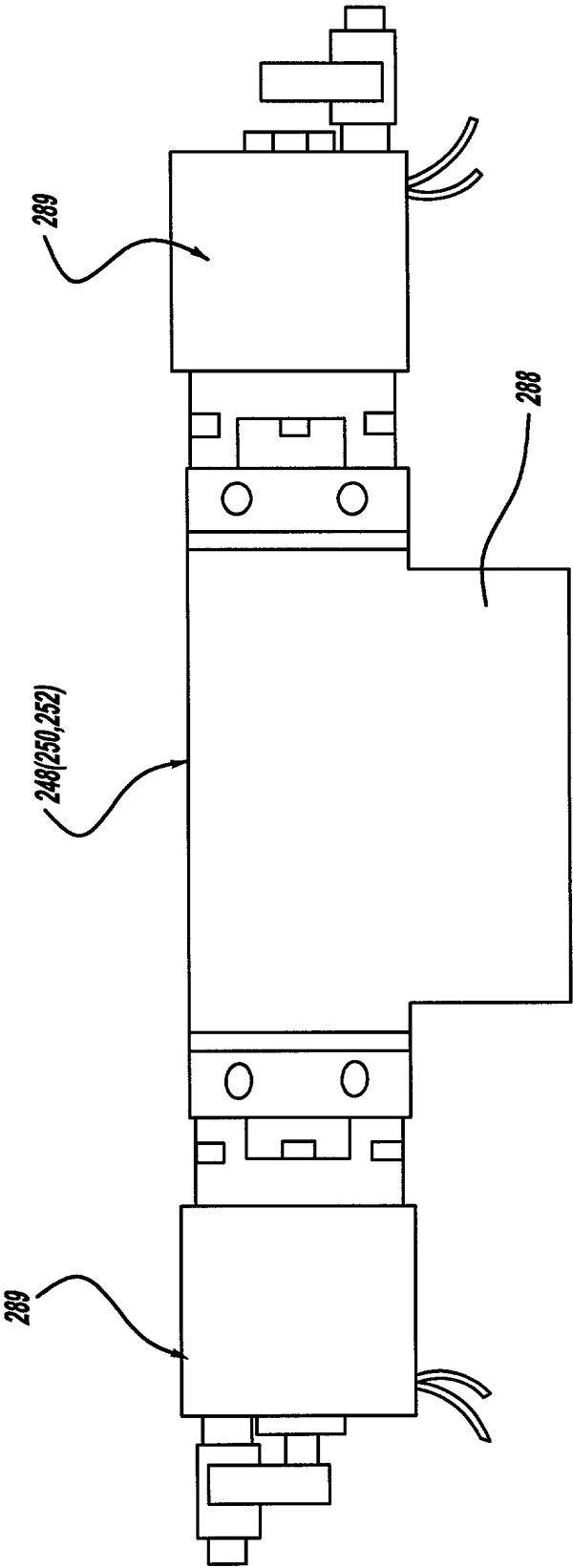
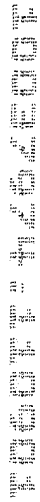
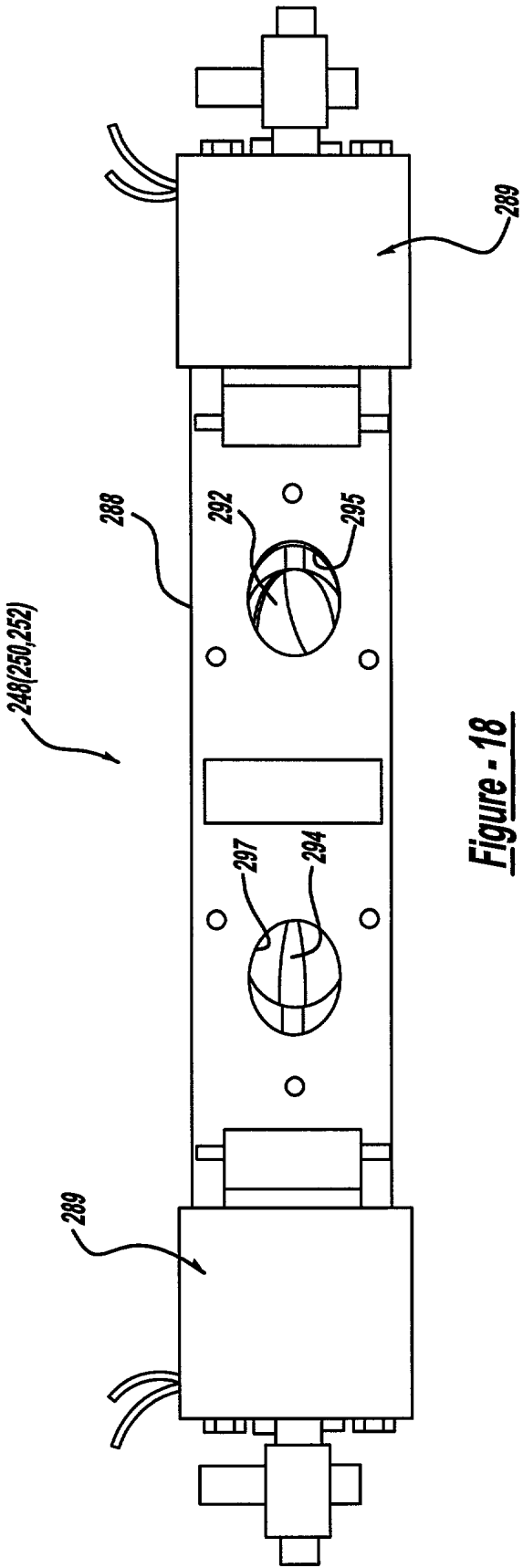


Figure - 16

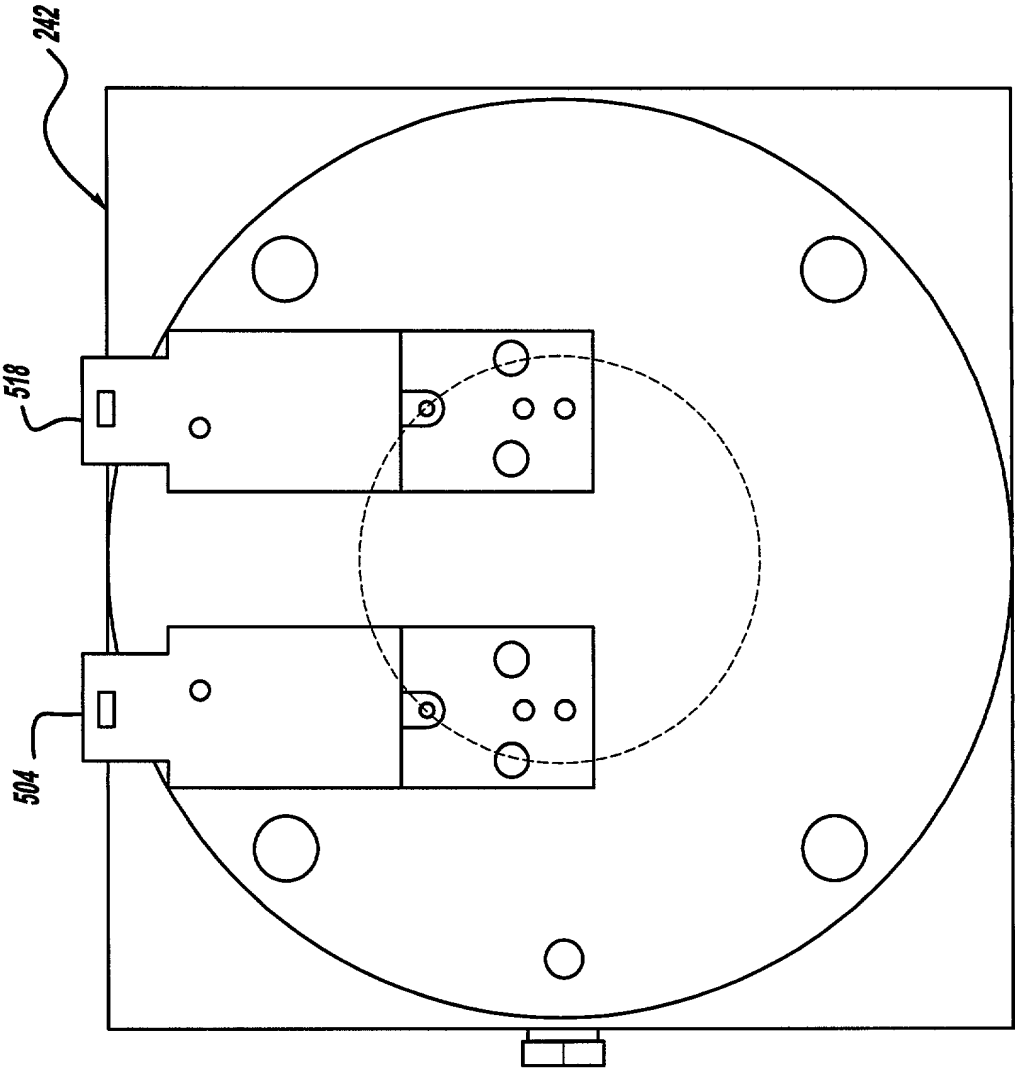
[illegible]



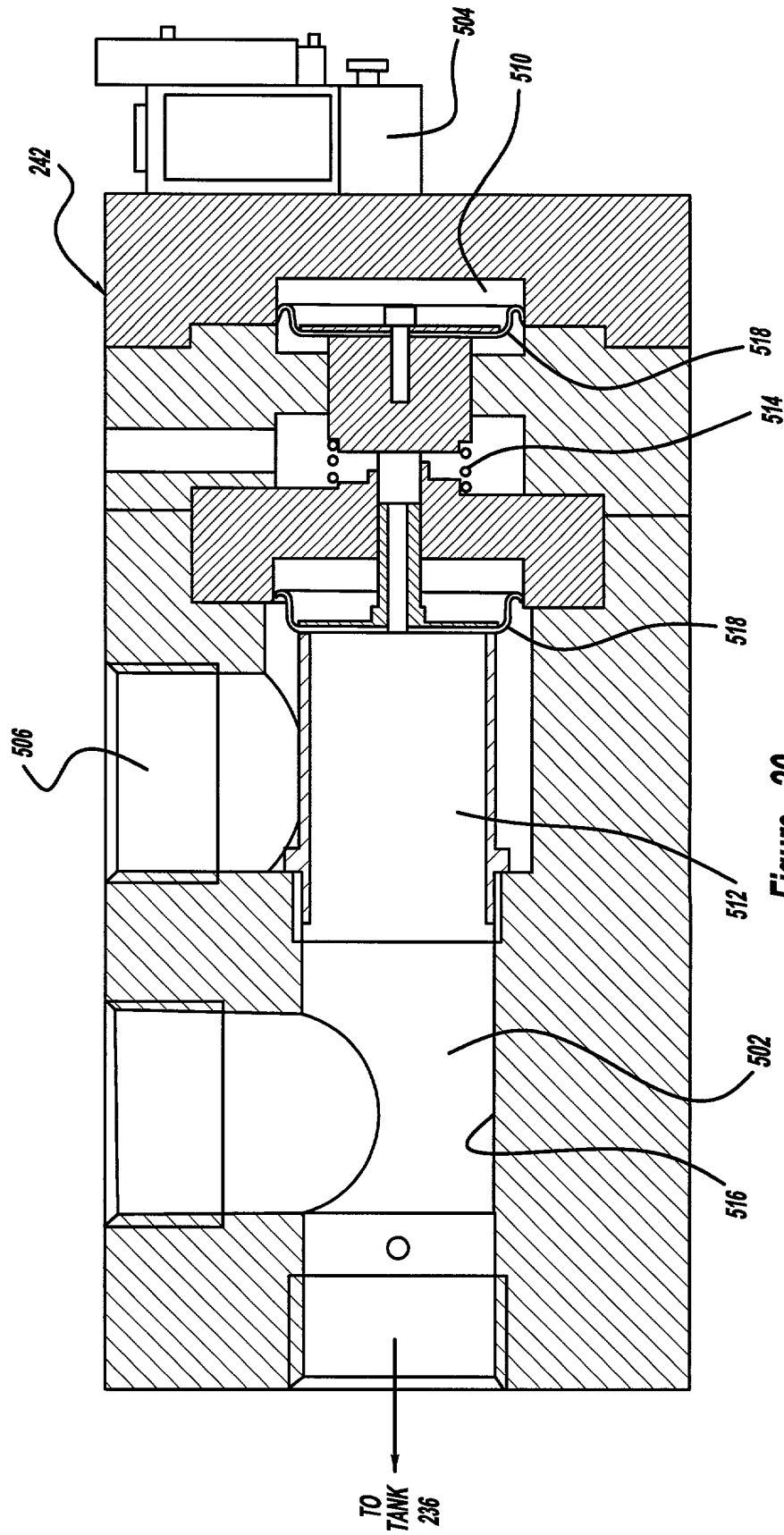
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**Figure - 20**

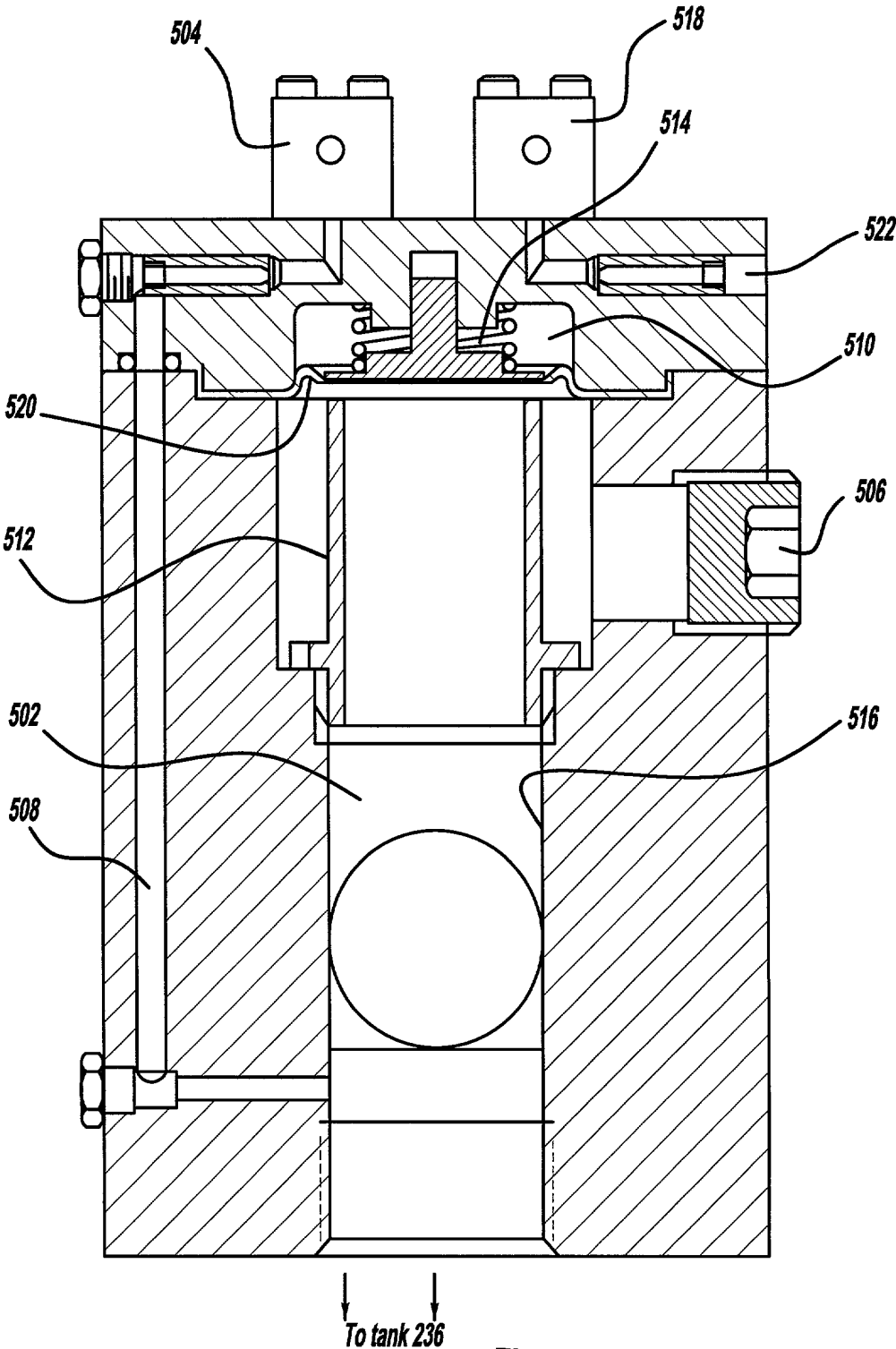
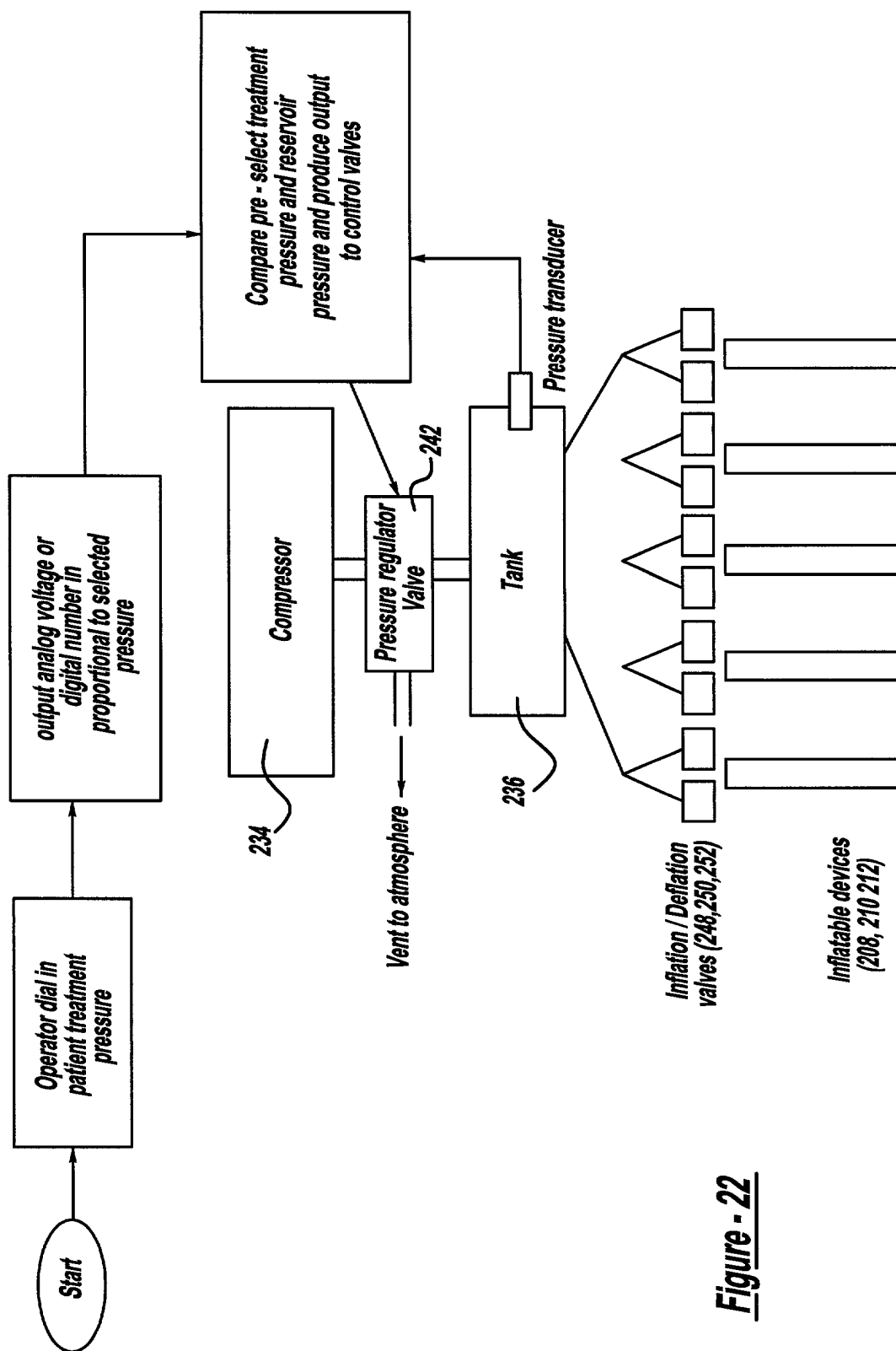


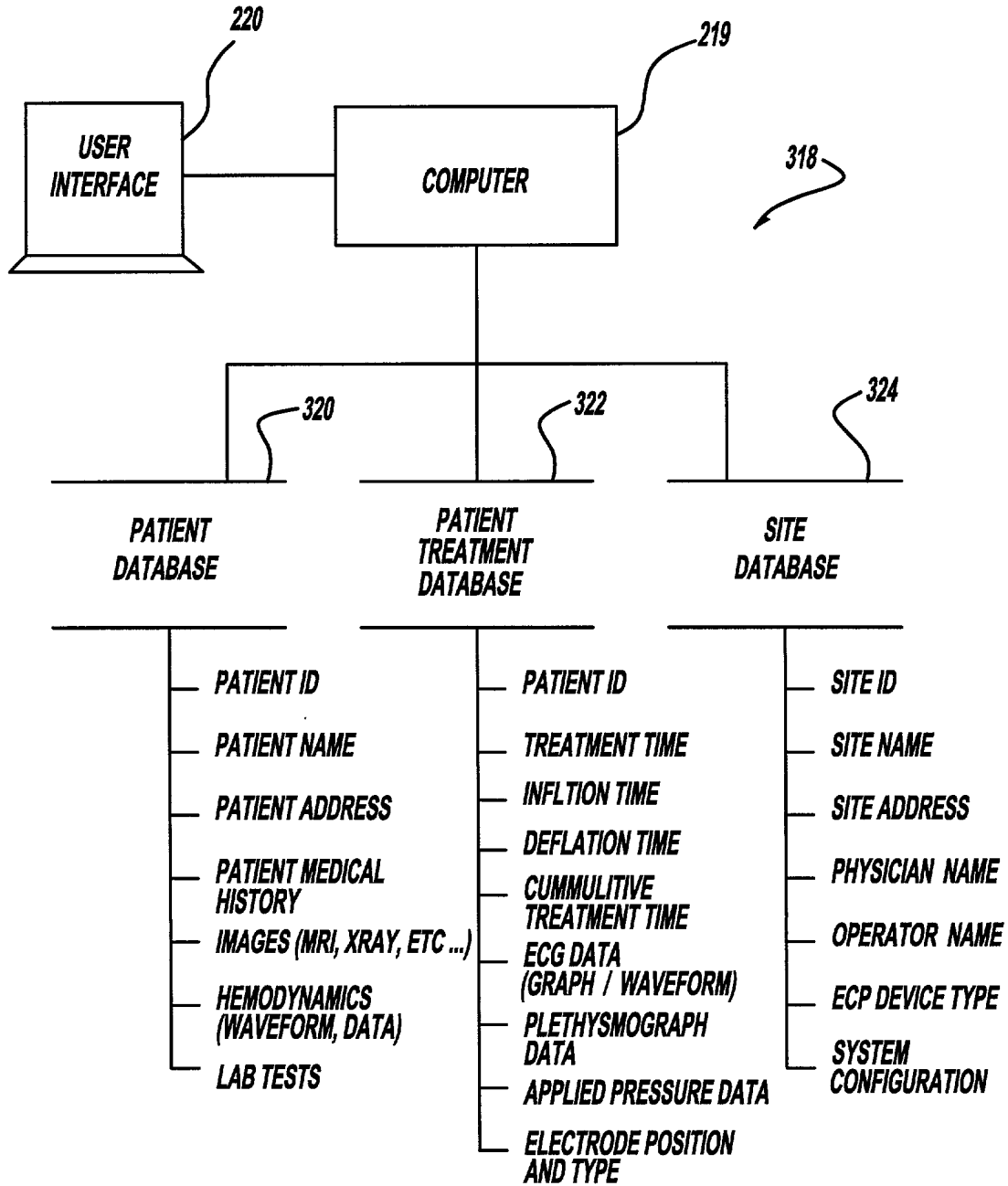
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**Figure - 23**

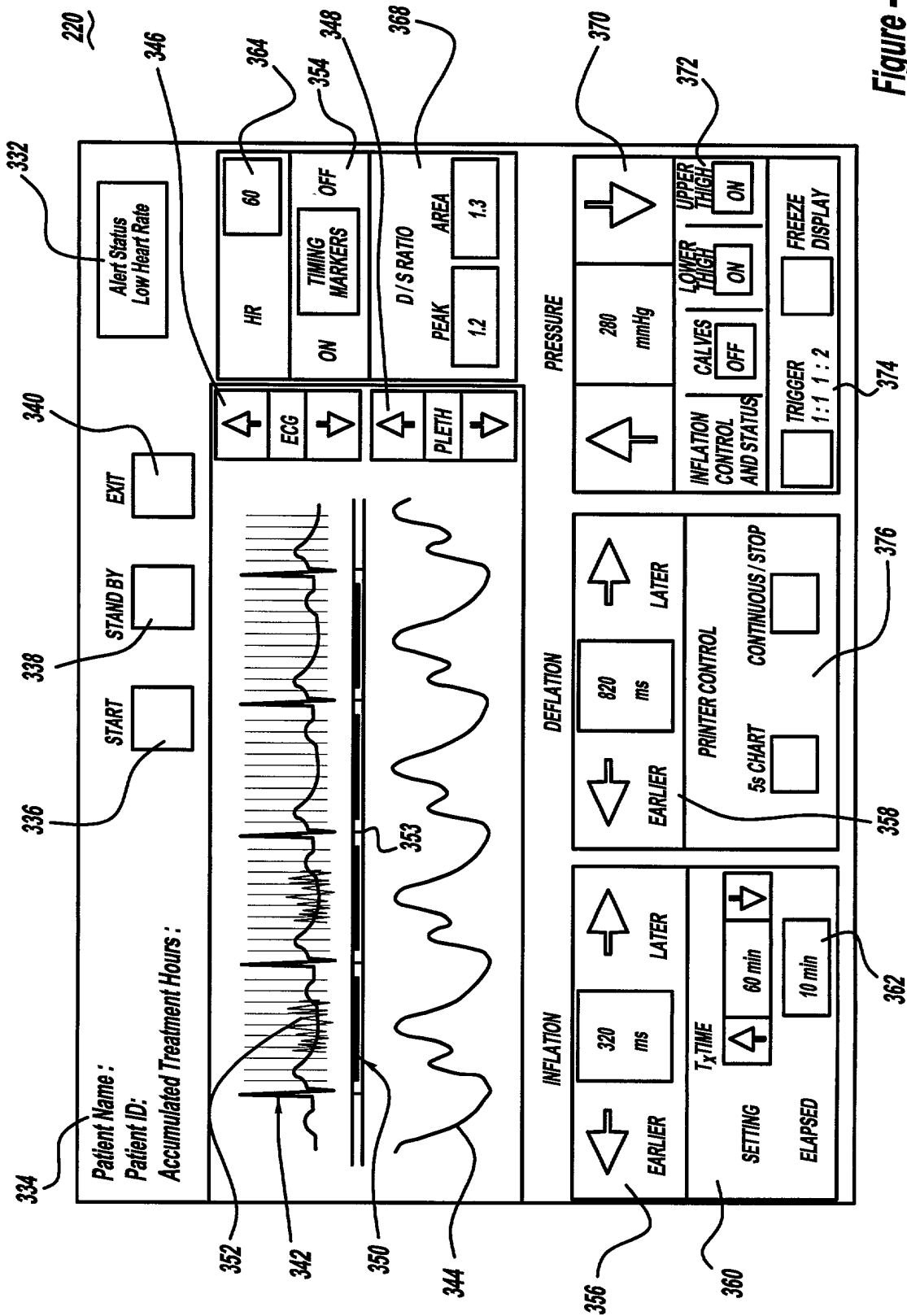


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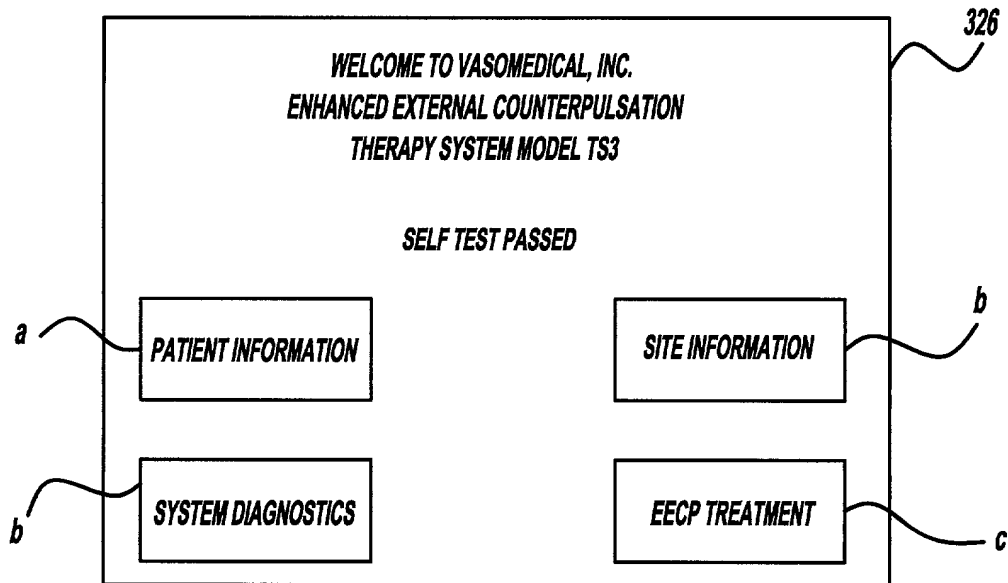


Figure - 25

NEW PATIENT INFORMATION

CLINICAL SITE NAME : \_ FIRST: MI:

ADDRESS LINE 1:

ADDRESS LINE 2:

CITY:

STATE ( ABBREVIATION ) : ZIP/POSTAL CODE :

PHONE NUMBER :

PATIENT ID: SEX (M = MALE F = FEMALE):

DATE OF BIRTH - MONTH : DAY: YEAR:

COMMENTS:

F1 - SAVE & EXIT F2 - ABORT

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**ENTER SITE INFORMATION**

**CLINICAL SITE NAME : \_**

**ADDRESS LINE 1:**

**ADDRESS LINE 2:**

**CITY:**

**STATE ( ABBREVIATION):                      ZIP/POSTAL CODE:**

**PHONE NUMBER:**

**FAX NUMBER:**

**PHYSICIAN IN CHARGE :**

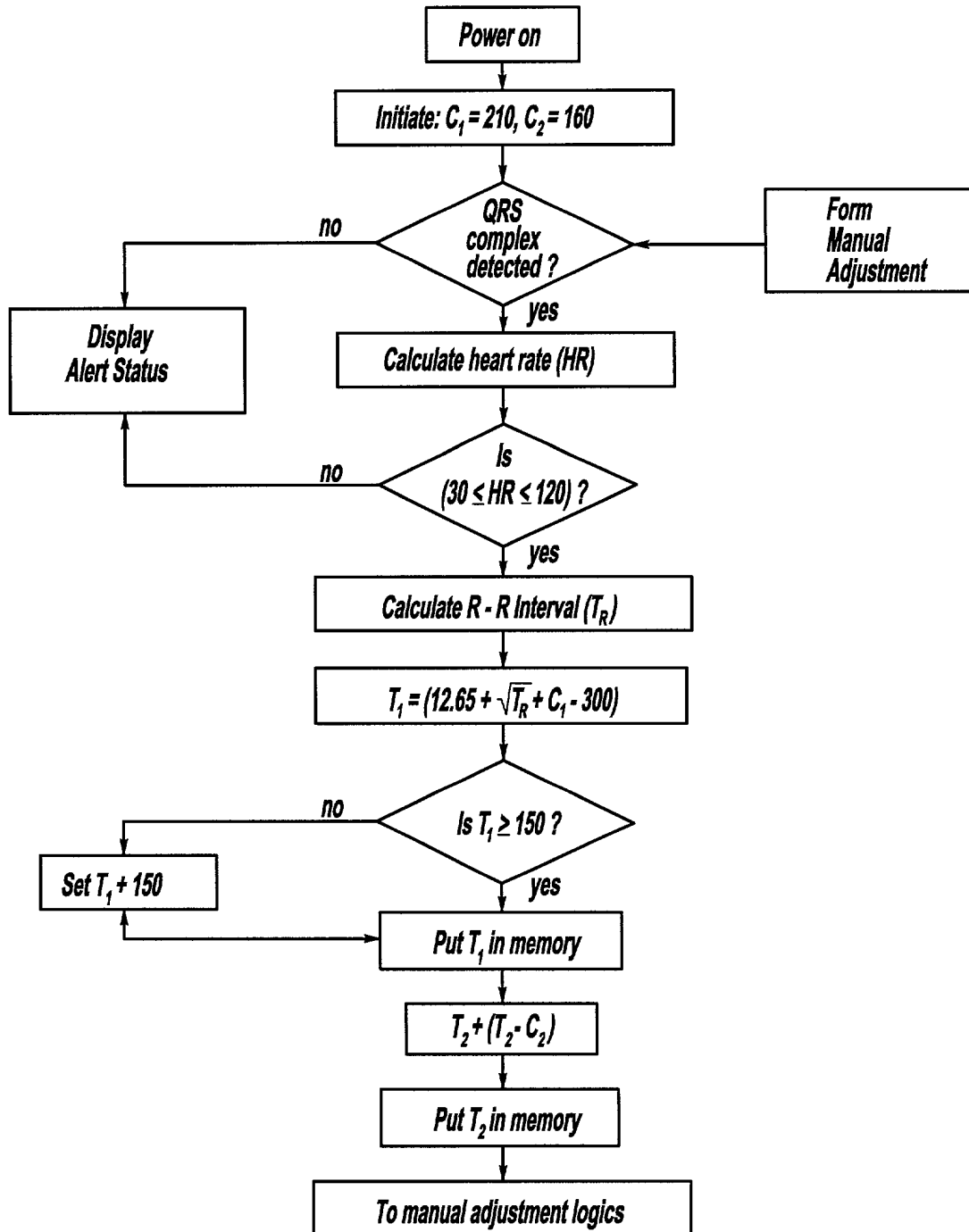
**F1 - SAVE & EXIT**

**F2 - ABORT**

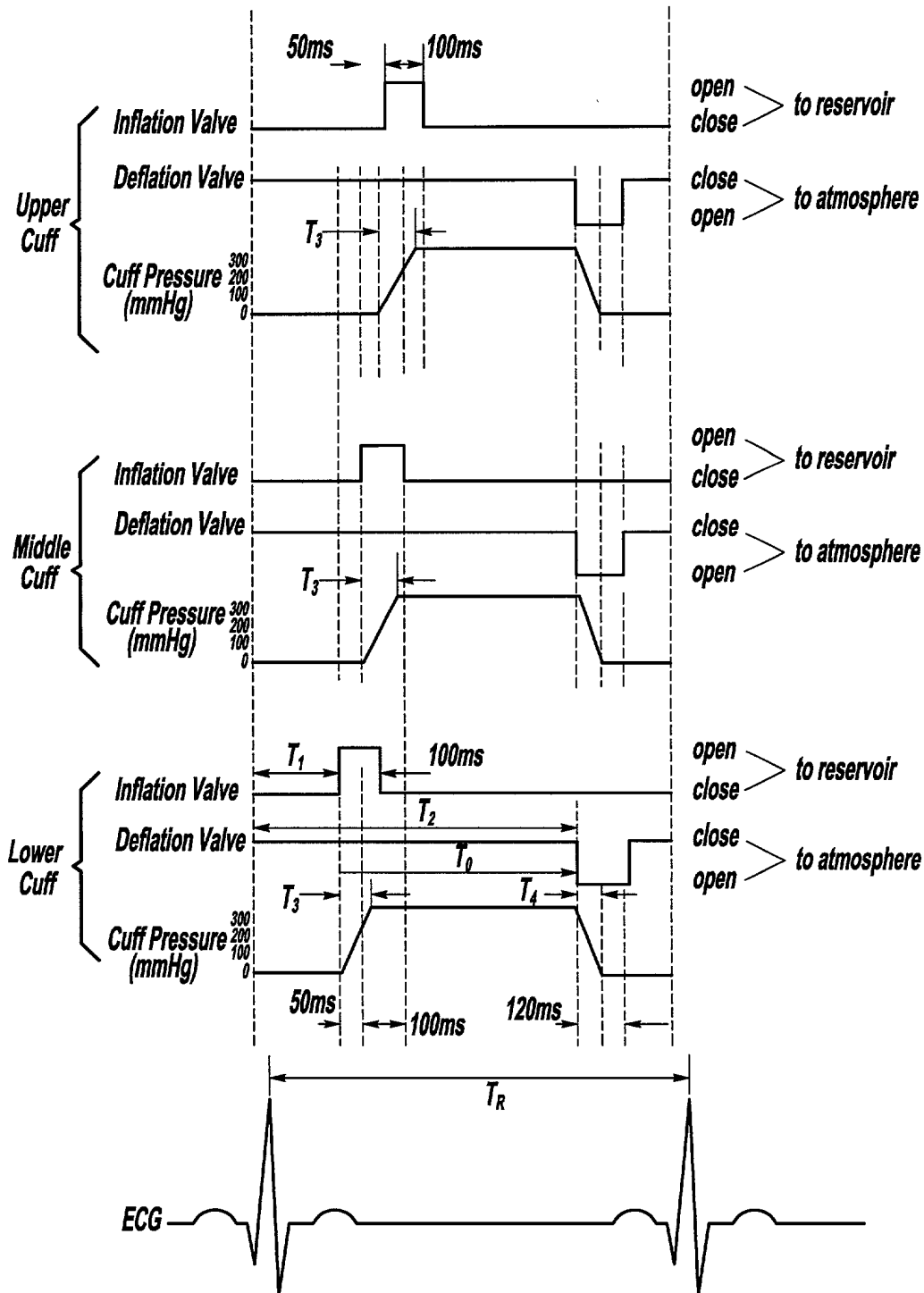
**Figure - 27**



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**Figure - 28**



**Figure - 29**